



KANSAS CORPORATION COMMISSION 1036610  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Cherokee Wells LLC</b>		License Number: <b>33539</b>	
Operator Address: <b>4916 CP BOWIE BLVD STE 204 FT WORTH TX 76107 4181</b>			
Contact Person: <b>Tracy Miller</b>		Phone Number: ( <b>620</b> ) <b>378 - 3650</b>	
Permit Number (API No. if applicable): <b>15-205-27753-0000</b>		Lease Name: <b>Riley</b>	
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input type="checkbox"/> Workover Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Burn Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape		Well Number: <b>A-2</b>	
		Source Location (QQQQ): <u>  <b>NW</b>  </u> <u>  <b>SE</b>  </u> <u>  <b>SE</b>  </u> <u>  <b>SE</b>  </u> Sec. <u>  <b>8</b>  </u> Twp. <u>  <b>29</b>  </u> R. <u>  <b>14</b>  </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>  <b>360</b>  </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>  <b>360</b>  </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>  <b>Wilson</b>  </u> County	
Type of waste to be disposed: <input checked="" type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste:    _____ No. of loads <u>  <b>80</b>  </u> Barrels    _____ Tons    _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input checked="" type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input type="checkbox"/> Other: _____			
If waste is transferred to another reserve pit, is the lease active? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Location of waste disposal:		Date of Waste Transfer: <u>  <b>03/25/2010</b>  </u>	
Operator Name: <u>  <b>Cherokee Wells LLC</b>  </u>		License No.: <u>  <b>33539</b>  </u>	
Lease Name: <u>  <b>ARNOLD</b>  </u>		Sec. <u>  <b>31</b>  </u> Twp. <u>  <b>28</b>  </u> R. <u>  <b>14</b>  </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: <u>  <b>D28696</b>  </u>		County: <u>  <b>Wilson</b>  </u>	
Comments:			
<p><i>Arnold</i> <i>3/31/10</i></p> <p>Submitted Electronically</p>			